

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Beka SOLOMON

Art Unit: 1649

Application No.: 09/441,140

Conf. No. 3910

Examiner: S. Turner

Filed: November 16, 1999

Washington, D.C.

For: PREVENTION OF PROTEIN AGGREGATION

Atty.'s Docket: SOLOMON1R

THE COMMISSIONER OF PATENTS
 U.S. Patent and Trademark Office
 Randolph Building, Mail Stop Amendments
 401 Dulany Street
 Alexandria, VA 22314

Sir:

Transmitted herewith is a [X] Amendment [X] Supp. Reissue Dec: 8/22/02 IDS: 8/02/06 IDS: Haber Reference
 in the above-identified application.

[] Small Entity Status: Applicant(s) claim small entity status. See 37 C.F.R. §1.27.

[XX] The fee has been calculated as shown below:

| (Col. 1) | | (Col. 2) | | (Col. 3) | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | | |
|---|---|----------|---------------------------------------|----------------------------|----------------------|-------------------|----|-------------------------|-------------------|----|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA EQUALS | RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE | |
| TOTAL | * 6 | MINUS | ** 99 | 0 | x 25 | \$ | | x 50 | \$ | |
| INDEP. | * 2 | MINUS | *** 26 | 0 | x 100 | \$ | | x 200 | \$ | |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | | + | 180 | \$ | + | 360 | \$ |
| | | | | | ADDITIONAL FEE TOTAL | | \$ | OR | TOTAL | \$ |

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.

[XX] Conditional Petition for Extension of Time

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

[] It is hereby petitioned for an extension of time in accordance with 37 CFR 1.136(a). The appropriate fee required by 37 CFR 1.17 is calculated as shown below:

| Small Entity | | Other Than Small Entity | |
|-----------------------------|--------------------|-----------------------------|---------------------|
| Response Filed Within | | Response Filed Within | |
| [] | First - \$ 60.00 | [] | First - \$ 120.00 |
| [] | Second - \$ 225.00 | [] | Second - \$ 450.00 |
| [] | Third - \$ 510.00 | [] | Third - \$ 1020.00 |
| [] | Fourth - \$ 795.00 | [] | Fourth - \$ 1590.00 |
| Month After Time Period Set | | Month After Time Period Set | |

[] Less fees (\$ _____) already paid for ___ month(s) extension of time on _____.

[XX] IDS Fee under 37 C.F.R. §117(p): \$ 180.00.

[] Please charge my Deposit Account No. 02-4035 in the amount of \$ _____.

[XX] Credit Card Payment Form, PTO-2038, is attached, authorizing payment in the amount of \$180.00.

[] A check in the amount of \$ _____ is attached (check no.).

[XX] The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connection with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR §1.16 and all patent processing fees under 37 CFR §1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR §1.18.

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